

**MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES****SUNBRIGHT DYE**

# 26220002

**1. Month of NOVEMBER 1, 2008 THRU NOVEMBER 30, 2008**

- |     |  |                                    |                                    |     |
|-----|--|------------------------------------|------------------------------------|-----|
| 2.  | Is Outlet # (8 digit) Correct?   | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 3.  | Is average Total flow-gal.day stated in space provided?                    | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 4.  | Is max. Total flow-gal day stated in space provided?                       | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 5.  | Is method used to calculate water stated?                                  | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 6.  | Are number of working days stated?   | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 7.  | Are there any parameters which have exceeded PVSC Local Limits?            | <input type="radio"/> Y            | <input checked="" type="radio"/> N | N/A |
| 8.  | Is proper compliance/non-compliance statement provided?                    | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 9.  | Have correct number of samples been submitted?                             | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 10. | Has PHC result been listed on MR-1 report?                                 | <input type="radio"/> Y            | <input checked="" type="radio"/> N | N/A |
| 11. | Has sample number been reported in space provided?                         | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 12. | Have all regulated parameters been listed on MR-1?                         | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 13. | Has sample type been stated on MR-1?                                       | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 14. | Have all samples been taken during this reporting period?                  | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 15. | Has NJDEPE certified lab been used?  | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 17. | Have results been written in space designated on MR-1?                     | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 18. | Is correct method used to preserve samples stated on MR-1?                 | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 19. | Has MR-1 been signed by authorized representative?                         | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 20. | Has information been submitted on proper MR-1 form?                        | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |
| 21. | Remove Arsenic from report if sampling not required                        | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A |

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

First Reviewer: comments on deficiencies Complete

Date Reviewed 1/9/09 Date sent to user \_\_\_\_\_

Date due back \_\_\_\_\_ Reviewer [Signature]

Second review comments on deficiencies \_\_\_\_\_

Date Reviewed \_\_\_\_\_ Date sent to user \_\_\_\_\_

Date due back \_\_\_\_\_ Reviewer \_\_\_\_\_

Date \_\_\_\_\_ Reviewer \_\_\_\_\_

JOE

**I RETREATMENT MONITORING REPORT**

OYE COMPANY, INC.

1076, PASSAIC, NJ 07055

REET, PASSAIC, NJ 07055

JAN - 2 2009

P.K.

281,000. x

7.48 =

2,101,880. \* +

Outlet#: 1

NIO MONTEIRO

Telephone#: 973-777-9830

2,101,880. x

0.95 =

ID: 26220002-1

1,996,786. \* +

PERIOD

11	30	2008
ION	DAY	YR

END

1,996,786. ÷

30. =


66,560. \* +

66,560. x

1.1 =

73,216. \* +

0. \* +

		PERIOD			AVERAGE		MAXIMUM		
		11	30	2008	Regulated flow-gal/day		66,560	79,872	
		ION	DAY	YR	Total Flow-gal/day		66,560	79,872	
		END			Method Used: Total gallons per month taken from water bill received from industrial complex owner (provided by property owner) minus 5% evaporation divided by 30 work days in period. Max = Avg +20%.				
					Mass or Concentration			No. of Samples	Sample type
					Mon Avg	Maximum	Units		Comp./grab
Cu	Sample measurement	< 0.008	<0.008	mg/L	1	Comp.			
	Permit requirement	3.02	N/A	"					
Zn	Sample measurement	0.054	0.054	"	1	Comp.			
	Permit requirement	1.67	N/A	"					
	Sample measurement								
	Permit requirement								
	Sample measurement								
	Permit requirement								
	Sample measurement								
	Permit requirement								
	Sample measurement								
	Permit requirement								
	Sample measurement								
	Permit requirement								
	Sample measurement								
	Permit requirement								
	Sample measurement								
	Permit requirement								

**PRETREATMENT MONITORING REPORT**

**Certification of Non-use (use additional sheets if necessary)** As per approval received from  
PVSC, Sunbrite Dye Company, Inc. is certifying non-use for Cadmium, Lead, Mercury and Nickel  
for this monitoring month.

**Compliance or non-compliance statement with compliance schedule (use additional sheets if necessary) for every parameter used:** Sunbrite Dye Company, Inc. was in compliance with the  
PVSC Local Limits for self monitoring performed during the month and as presented in this report.

**Explain Method for preserving samples:**

Metal sample was a composite which was preserved with HNO<sub>3</sub> to pH < 2.0. All samples were  
transferred to the laboratory in an ice filled cooler.

I certify under penalty of law that this document and all attachments were prepared under my direction  
or supervision in accordance with a system designed to assure that qualified personnel properly gather  
and evaluate the information submitted. Based on my inquiry of the person or persons who manage the  
system, or those persons directly responsible for gathering the information, the information submitted is,  
to the best of my knowledge and belief, true, accurate and complete. I am aware that there are  
significant penalties for submitting false information, including the possibility of fine and imprisonment  
for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988

  
\_\_\_\_\_  
Signature of Principal  
Executive or Authorized Agent

Antonio Monteiro

Maintenance Manager  
Type Name and Title

12-16-2008  
Date

PVSC Form MR-1 Rev: 5 3/91 P2

**SUNBRITE DYE COMPANY, INC. - MR-1: NOVEMBER 2008**

**TOTAL VOLUME FOR SUNBRITE DYE DETERMINED  
FROM BREAKDOWN OF WATER BILL FOR  
ENTIRE INDUSTRIAL COMPLEX (PIONEER PROPERTIES)**

30 WORK DAYS
--------------

281,000 Cubic Feet  
      x7.48        
 2,101,880 Gallons  
      x .95       (5% Evaporation)  
 1,996,786 Gallons discharged  
               this month  
               for Outlet # 26220002-1

$$\frac{66,560}{30 \overline{) 1,996,786}}$$
 GPD = Avg. Regulated & Total Flow  
 for Outlet # 26220002-1

$$\frac{66,560}{\quad \quad \quad \times 1.20}$$
 79,872 GPD = Max. Regulated & Total Flow  
 for Outlet # 26220002-1

12/11/2008 14:04 FAX 19738157664

SUNBRITE

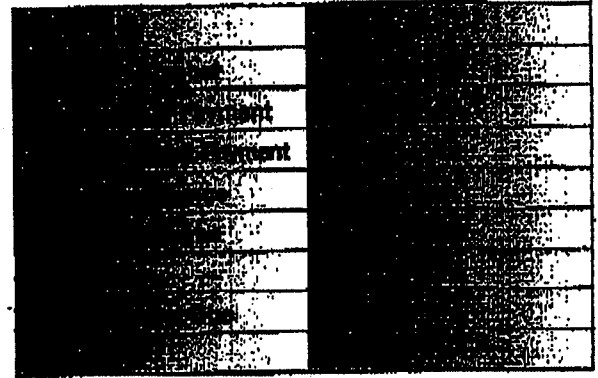
004

DEC-11-2008 12:26

7182726199 P.03/03



Passaic Valley Water Commission  
P.O. Box 11393  
Newark, New Jersey 07101-4393  
973-340-4300  
877-772-7077

SERVICE ADDRESS **35 8TH ST UT001, PASSAIC**BILL TYPE **MONTHLY BILL****Billing Period**

Oct 07, 2008-Nov 18, 2008

**Services**

Description	Charge
WATER SERVICE CHARGE	318.80
WATER SERVICE CHARGE	337.80
WATER SERVICE CHARGE	661.36
FIRST 333 CCF	462.87
NEXT 9,999,999 CCF	3441.95
SEWER SERVICE CHARGE	36.41
SEWER CONSUMPTION	1385.84
SEWER SERVICE CHARGE	12.14
SEWER CONSUMPTION	1793.23
SEWER SERVICE CHARGE	12.14
SEWER CONSUMPTION	2611.50

**PAID****Meters**

Meter No	Meter Size
60108141	2 INCH
60260519	2 INCH
70029332	4 INCH
60185031	2 INCH
70039226	6 INCH

Current	Previous	Consumption
4316	4288	280
3349	3301	480
3536	3533	1030
1438	1402	36
2295	2280	1500

280  
1030  
1500  
2810 CCF  
continued...

SUNBRIT  
**PAID**  
Check  
12-9-08

DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER



Passaic Valley Water Commission  
P.O. Box 11393  
Newark, New Jersey 07101-4393  
973-340-4300

☐ To change mailing address check here and fill out back of form. Please include account number on check or money order. Make check or money order payable to PWDC.



Mailing Address:

Service Address:  
**35 8TH ST UT001, PASSAIC**

\*B-01-K2G-CM-00008

|||||  
PASSAIC COMMERCIAL PROPERTIES  
107-20 AVENUE D  
BROOKLYN NY 11236

PASSAIC VALLEY WATER COMMISSION  
PO BOX 11393  
NEWARK NJ 07101-4393  
|||||

000122775000072160000011073746

TOTAL P.03



**REVISED  
ANALYTICAL DATA REPORT**

for  
**SunBrite Dye Co., Inc.**  
35 8th St.  
Passaic, NJ 07055

**Project Name: PVSC MONITORING**  
**Lab Case Number: E08-12717**

MDL = METHOD DETECTION LIMIT

&lt; = LESS THAN THE MDL

**Metals**

Lab ID: 12717-001

Client ID: 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 11/4/2008

Time Sampled: 08:45

Date Analyzed: 11/7/08

**Parameter****Result**

Q

**MDL**

Copper

&lt; 0.008

0.008

Zinc

0.054

0.008

**General Analytical**

Lab ID: 12717-001

Client ID: 01

Percent Moisture: 100

Date Sampled: 11/4/2008

Time Sampled: 08:45

**Parameter****Result****MDL****Matrix-Units****Date Analyzed**

Biochemical Oxygen Demand

617

2.00

Aqueous-mg/L

11/5/2008 8:00

Total Suspended Solids

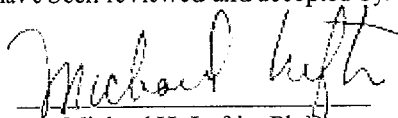
52.0

25.0

Aqueous-mg/L

11/5/2008 10:00

These data have been reviewed and accepted by:

  
Michael H. Leftin, Ph.D.  
Laboratory Director

273 Franklin Road  
Randolph, NJ 07869  
Phone: 973 361 4252  
Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program

**INTEGRATED ANALYTICAL LABORATORIES**

## PROJECT INFORMATION

Case No. **E08-12717**Project **PVSC MONITORING**Customer **SunBrite Dye Co., Inc.**P.O. # **NA**Contact **John Sabo**Received **11/4/2008 17:3**EMail **ENVIRO43@aol.com**☐ EMail EDDsVerbal Due **12/16/2008**Phone **(973) 633-5426**

Fax

Report Due **12/23/2008**Report To

35 8th St.

Passaic, NJ 07055

Bill To

Enviro-Comp

P.O. Box 3457

Wayne, NJ 07474

Attn: John Sabo

Attn: John Sabo

Report Format **Result Only**

Additional Info

☐ State Form☐ Field Sampling☐ Conditional VOA

Lab ID	Client Sample ID	Depth Top / Bottom	Sampling Time	Matrix	Unit	# of Containers
12717-001	01	n/a	11/4/2008@08:45	Aqueous	ug/L	2

Sample #	Tests	Status	QA Method
001	Copper - Cu	Complete	200.8
"	Nickel - Ni	Complete	200.8
"	Zinc - Zn	Complete	200.8
"	BOD	Complete	5210B
"	TSS (Suspended)	Complete	2540D

12/16/2008 11:12 by kim - REV 1

REV 01

REPRINT REPORT WITHOUT NICKEL, PER JOHN SABO

ORIGINAL FAX 11/19

ORIGINAL HC 11/21

## INTEGRATED ANALYTICAL LABORATORIES, LLC

## SAMPLE RECEIPT VERIFICATION

CASE NO: E 08

12717

CLIENT:

Sunbrite

COOLER TEMPERATURE: 2° - 6°C:

✓

( See Chain of Custody)

Comments

COC: COMPLETE / INCOMPLETE

KEY

✓ = YES/NA

✗ = NO

- ✓ Bottles Intact
- ✓ no-Missing Bottles
- ✓ no-Extra Bottles

- ✓ Sufficient Sample Volume
- ✓ no-headspace/bubbles in VOs
- ✓ Labels intact/correct
- ✓ pH Check (exclude VOs)<sup>1</sup>
- ✓ Correct bottles/preservative
- ✓ Sufficient Holding/Prep Time<sup>1</sup>

☐ Sample to be Subcontracted

<sup>1</sup> All samples with "Analyze Immediately" holding times will be analyzed by this laboratory past the holding time. This includes but is not limited to the following tests: pH, Temperature, Free Residual Chlorine, Total Residual Chlorine, Dissolved Oxygen, Sulfite.

ADDITIONAL COMMENTS:

SAMPLE(S) VERIFIED BY:

INITIAL

[Signature]

DATE

11/4/03

CORRECTIVE ACTION REQUIRED:

YES

☐

(SEE BELOW)

NO

☒

CLIENT NOTIFIED:

YES

☐

Date/ Time:

NO

☐

PROJECT CONTACT:

SUBCONTRACTED LAB:

DATE SHIPPED:

ADDITIONAL COMMENTS:

VERIFIED/TAKEN BY:

INITIAL

EJ

DATE

11/5

REV 02/05

## Laboratory Custody Chronicle

IAL Case No.

E08-12717

Client SunBrite Dye Co., Inc.Project PVSC MONITORINGReceived On 11/4/2008@17:3**Department: Metals**

			<u>Prep. Date</u>	<u>Analyst</u>	<u>Analysis Date</u>	<u>Analyst</u>
Copper - Cu	12717-001	Aqueous	11/ 5/08	Lisa	11/ 7/08	Helge
Nickel - Ni	-001	Aqueous	11/ 5/08	Lisa	11/ 7/08	Helge
Zinc - Zn	-001	Aqueous	11/ 5/08	Lisa	11/ 7/08	Helge

**Department: Wet Chemistry**

			<u>Prep. Date</u>	<u>Analyst</u>	<u>Analysis Date</u>	<u>Analyst</u>
BOD	-001	Aqueous	n/a	n/a	11/ 5/08@08:00	Kris
TSS (Suspended)	-001	Aqueous	n/a	n/a	11/ 5/08	Kam

Review and Approval:

